

## MISSOURI INDIVIDUAL INCOME TAX RETURN SINGLE/MARRIED (INCOME FROM ONE SPOUSE)—SHORT FORM 2003 FORM MO-1040A

7.00	Salar I	<u>SINGLE/MARRIED (II</u>	NCOME FR	OW ONE 3	<b>PUU</b> 3	<u>с)—эпо</u>	<u>к і</u>	<u> FUI</u>	KIVI — •			•		• • • • •
LAS	IAN T	ME	FIRST NAME			MIDDLE INITIAL	DECE	EASED 2003	SOCIAL SECUR	RITY NUMB	ER		VEND	TWARE OR CODE ed by DOR)
SPO	OUSE'	S LAST NAME	FIRST NAME			MIDDLE INITIAL	DECE	EASED 2003	SPOUSE'S SOC	CIAL SECU	RITYI	NUMBER		)2
IN C	ARE	OF NAME (ATTORNEY, EXECUTOR, P	PERSONAL REPRES	ENTATIVE, ETC.)	(	COUNTY OF RES	IDEN	DE I			SCH	HOOL DIST	RICT NO.	
PRI	SENT	TADDRESS (INCLUDE APARTMENT N	O. OR RURAL ROU	TE)		CITY, TOWN, OR	POST	OFFICI	E, STATE, AND 2	ZIP CODE				
PLE	ASE (	CHECK THE APPROPRIATE AG	SE 65 OR OLDER	BLI	ND		100%	DISAE	BLED	NON	l-OBI	LIGATED	SPOUSE	
								OURS						
UK	TOUR	SPOUSE.	1 SPUUSE		5PUU5E		□ Si	PUUSE			T	DE		
ΝE	1.	Federal adjusted gross incom 1040A—Line 21; 1040EZ—Li	•							,	,			00
INCOME	2	Any state income tax refund i									<u>'</u> 2 -			00
Z		Total Missouri Adjusted Gr									3 =			00
		Mark your filing status box be												
		<ul> <li>□ A. Single — \$2,100 (See</li> <li>□ B. Claimed as a dependent tax return — \$0.00</li> <li>□ C. Married filing joint feder Check which spouse here is a spouse of the property of the pr</li></ul>	ent on another p ral & combined N nad income:	erson's federal	0 j	☐ G. Qualify	d filin ling) of ha /ing \	ng sepa — <b>\$4,</b> buseho widow	arate (spouse <b>200</b> old — <b>\$3,500</b> (er) with					00
DEDUCTIONS	5.	☐ Yourself ☐ Spouse dependent child — \$3,500  5. Tax from federal return (Do not enter amount from your Form W-2(s)— 00 Married filing combined—maximum of \$10,000 NOT federal tax withheld.)									5 +	+		00
DE	6.	<ol> <li>Missouri standard deduction or itemized deductions. Single — \$4,750; Head of Household — \$7,000; Married Filing Separate — \$4,750; Married Filing a Combined Return or Qualifying Widow(er) — \$9,500 If claimed as a dependent, age 65 or older, or blind, see federal return. If itemizing, see back of form</li> </ol>									6 +	•		00
		Number of dependents you c (Do not include yourself or	your spouse.)						1,200 =		7 +	•		00
	8. Long-term care insurance deduction							3 +			00			
											9 =	•		00
TAX		Missouri Taxable Income — Total Tax — Use the tax table									0			00
										· · · · · · · · · · ·	+			- 00
ω.	12. Missouri tax withheld from your Form W-2(s) and Form 1099(s). Attach copies of Form W-2(s) and Form 1099(s)							1	2			00		
FUNDS	13.	Any Missouri estimated tax p	ayments made t	for 2003						1	3			00
EFU	14.	Total Payments — Add Line	s 12 and 13							1	4			00
PAYMENTS/RE	15.	If Line 14 (Total Payments) is									_			
ENT	40	overpayment) here. (If Line				)	• • •			1	_			00
١YΜ	16.	Amount from Line 15 that you	ı want appiled to			Elderly Home		 A√ Mi	ssouri National	<b>1</b>	_	evenue		/orkers'
Ь/	17.	Enter the amount of your donation in the trust fund		<b>X</b>		Elderly Home Delivered Mea	als	Mi Gu	ard	General Revenue			(Workers) N	lemorial
		boxes to the right	. 17	00	00		00		00			00	$\bigcirc$	00
	18.	Subtract Lines 16 and 17 from mail to: Department of Reve							DEI	FUND 1	g			00
. T0	10	·			•					OND I	_			- 00
MAIL TO		If Line 14 is less than Line 11, enter the difference here. You have an amount due. <b>Sign below</b> and mail to: <b>Department of Revenue, P.O. Box 329, Jefferson City, MO 65107-0329 AMOUNT YOU OWE</b>								OWE 1	9			00
		The Departmen	nt of Revenue r	nay collect che	cks retu	ırned for insı	uffici	ient o	r uncollecte	d funds	elec	tronica	lly.	
	correc	r penalties of perjury, I declare that I have tt, and complete. Declaration of preparer ( to \$500 shall be imposed on any individua	other than taxpayer)	is based on all informa								nonalt <sub>i</sub>		<b>E P F</b>
TURE		authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of the preparer's firm.  PAID PREPARER'S PHONE ( )								HONE				
SIGNATURE	SIGNA	TURE		DATE		PAID PREPARER'S	SIGNA	TURE				FEIN, SS	N, OR PTIN	
"	SPOU	SE'S SIGNATURE		DAYTIME TELEPHONE		PAID PREPARER'S	ADDRE	ESS AND	ZIP CODE				DATE	

FORM MO-1040A PAGE 2

## **MISSOURI ITEMIZED DEDUCTIONS**

· Complete this section only if you itemized deductions on your federal return. (See the instructions.)

Attach a copy of your Federal Form 1040 (pages 1 and 2) and Federal Schedule A.		
1. Total federal itemized deductions from Federal Form 1040, Line 37	1	00
2. 2003 (FICA) — Social security \$ + Medicare \$	2	00
3. 2003 Railroad retirement tax — (Tier I and Tier II) \$ + Medicare \$	3	00
4. 2003 Self-employment tax — Amount from Federal Form 1040, Line 28	4	00
5. TOTAL — Add Lines 1 through 4	5	00
6. State and local income taxes — See instructions	00	
7. Earnings taxes included in Line 6 — See instructions	00	
8. Net state income taxes — Subtract Line 7 from Line 6, or enter Line 8 from worksheet in the instructions	8	00
9. MISSOURI ITEMIZED DEDUCTIONS — Subtract Line 8 from Line 5. Enter here and on front of form, Line 6	9	00

NOTE: IF LINE 9 IS LESS THAN YOUR FEDERAL STANDARD DEDUCTION, SEE INSTRUCTIONS.

## 2003 TAX TABLE

If Missouri taxable income from Form MO-1040A, Line 10, is less than \$9,000, use the table to figure tax; if more than \$9,000, use worksheet below or use the online tax calculator at www.dor.mo.gov/tax/personal/taxcalculator/

If Line 1	0 is																
At least	But less than	Your tax is															
0	100	\$ 0	1,500	1,600	\$ 26	3,000	3,100	\$ 62	4,500	4,600	\$109	6,000	6,100	\$167	7,500	7,600	\$238
100	200	2	1,600	1,700	28	3,100	3,200	65	4,600	4,700	113	6,100	6,200	172	7,600	7,700	243
200	300	4	1,700	1,800	30	3,200	3,300	68	4,700	4,800	116	6,200	6,300	176	7,700	7,800	248
300	400	5	1,800	1,900	32	3,300	3,400	71	4,800	4,900	120	6,300	6,400	181	7,800	7,900	253
400	500	7	1,900	2,000	34	3,400	3,500	74	4,900	5,000	123	6,400	6,500	185	7,900	8,000	258
500	600	8	2,000	2,100	36	3,500	3,600	77	5,000	5,100	127	6,500	6,600	190	8,000	8,100	263
600	700	10	2,100	2,200	39	3,600	3,700	80	5,100	5,200	131	6,600	6,700	194	8,100	8,200	268
700	800	11	2,200	2,300	41	3,700	3,800	83	5,200	5,300	135	6,700	6,800	199	8,200	8,300	274
800	900	13	2,300	2,400	44	3,800	3,900	86	5,300	5,400	139	6,800	6,900	203	8,300	8,400	279
900	1,000	14	2,400	2,500	46	3,900	4,000	89	5,400	5,500	143	6,900	7,000	208	8,400	8,500	285
1,000	1,100	16	2,500	2,600	49	4,000	4,100	92	5,500	5,600	147	7,000	7,100	213	8,500	8,600	290
1,100	1,200	18	2,600	2,700	51	4,100	4,200	95	5,600	5,700	151	7,100	7,200	218	8,600	8,700	296
1,200	1,300	20	2,700	2,800	54	4,200	4,300	99	5,700	5,800	155	7,200	7,300	223	8,700	8,800	301
1,300	1,400	22	2,800	2,900	56	4,300	4,400	102	5,800	5,900	159	7,300	7,400	228	8,800	8,900	307
1,400	1,500	24	2,900	3,000	59	4,400	4,500	106	5,900	6,000	163	7,400	7,500	233	8,900	9,000	312
															9.000		315

FIGURING TAX OVER \$9,000

## Yourself/Spouse **Example** Missouri taxable income (Line 10) . . . . . . \$ 12,000 9.000 9,000 3,000 Multiply by 6% . . . . . . . . . . . . x 6% Tax on income over \$9,000 . . . . . . . . = \$ 180 Add \$315 (tax on first \$9,000) . . . . . . + \$ 315 315 TOTAL MISSOURI TAX . . . . . . . . . . = \$\_ 495

If more than \$9,000, tax is \$315 PLUS 6 percent of excess over \$9,000. Round to nearest whole

Round to nearest whole dollar and enter on front of form, Line 11.

Checklist	Before	Mailing	Return
OHICOMISE		ITIGITIES	IXCLAII

	Sign	your	return.
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Check your calculations.

Take the correct federal tax deduction.

Attach all required documentation:

- Form W-2(s);
- Form 1099(s);
- Copy of Federal Return, Pages 1 and 2; and
- Copy of Federal Schedule A (if you itemize deductions).